# Case 18-02955 Doc 1 Filed 02/01/18 Entered 02/01/18 15:19:12 Desc Main Document Page 1 of 52

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

# Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	Andrzej	
	your government-issued picture identification (for example, your driver's license or passport).	First name	First name
		Stanislaw	
		Middle name	Middle name
	Bring your picture	Adamczyk	
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	3	
	maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3597	

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Case number (if known)

Debtor 1 Andrzej Stanislaw Adamczyk

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs If Debtor 2 lives at a different address: Where you live 3120 Boyle Ter. Apt GF River Grove, IL 60171 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Cook County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

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Debtor 1 Andrzej Stanislaw Adamczyk

Par	Tell the Court About	Your Bar	nkruptcy Ca	ise				
7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Required</i> page 1 and check the approp	by 11 U.S.C. § 342(b) for Individuals Filing for Bankri riate box.	uptcy	
	choosing to file under	Chapter 7						
		☐ Cha	apter 11					
		☐ Cha	apter 12					
		☐ Cha	apter 13					
8. How you will pay the fee  I will pay the entire fee when I file my petition. Please check wire about how you may pay. Typically, if you are paying the fee yourse order. If your attorney is submitting your payment on your behalf, you appear and pre-printed address.					e yourself, you may pay with cash, cashier's check, o	r money		
						ption, sign and attach the Application for Individuals	to Pay	
			•		s (Official Form 103A). I <b>ived</b> (You may request this o	otion only if you are filing for Chapter 7. By law, a jud	ge may.	
		b a	out is not requipplies to you	uired to, waive y ur family size an	your fee, and may do so only ind you are unable to pay the fe	f your income is less than 150% of the official poverty the in installments). If you choose this option, you mus official Form 103B) and file it with your petition.	/ line that	
9.	Have you filed for	■ No.						
	bankruptcy within the last 8 years?	☐ Yes.						
	last o years.	<b>□</b> 165.	District		When	Case number		
			District		When	Case number		
			District		When	Case number		
10.	Are any bankruptcy cases pending or being	■ No						
	filed by a spouse who is not filing this case with you, or by a business	☐ Yes.						
	partner, or by an affiliate?							
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your residence?	■ No.	Go to I	ine 12.				
		☐ Yes.	Has yo	our landlord obta	ained an eviction judgment aga	ainst you and do you want to stay in your residence?		
				No. Go to line	12.			
				Yes. Fill out Indibankruptcy pet		on Judgment Against You (Form 101A) and file it with	n this	

Page 4 of 52 Case number (if known) Document Debtor 1 Andrzej Stanislaw Adamczyk

art	Report About Any Bu	sinesses	You Own as a S	Sole Proprietor				
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.					
		☐ Yes.	Name and lo	ocation of business				
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of bus	siness, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Stre	eet, City, State & ZIP Code				
	it to this petition.		Check the ap	ppropriate box to describe your business:				
			☐ Healt	th Care Business (as defined in 11 U.S.C. § 101(27A))				
			☐ Single	le Asset Real Estate (as defined in 11 U.S.C. § 101(51B))				
			☐ Stock	kbroker (as defined in 11 U.S.C. § 101(53A))				
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6)				modity Broker (as defined in 11 U.S.C. § 101(6))				
			□ None	e of the above				
If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set a deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, so operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the in 11 U.S.C. 1116(1)(B).				that you are a small business debtor, you must attach your most recent balance sheet, statement of				
	For a definition of small	■ No.	I am not filing	g under Chapter 11.				
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing un Code.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.				
		☐ Yes.	I am filing un	nder Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.				
art	t 4: Report if You Own or	Have Any	Hazardous Pro	operty or Any Property That Needs Immediate Attention				
14.	Do you own or have any	■ No.						
	property that poses or is alleged to pose a threat of imminent and	■ No.  ☐ Yes.	What is the haz	zard?				
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?		If immediate att					
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the pr	roperty?				
	Or or specific			Number, Street, City, State & Zip Code				

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Debtor 1 Andrzej Stanislaw Adamczyk

Case number (if known)

### Part 5:

### Explain Your Efforts to Receive a Briefing About Credit Counseling

## Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

### Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

## ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

## ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

## About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

## ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Andrzej Stanislaw Adamczyk Document Page 6 of 52 Case number (if known)

Part	6: Answer These Questi	ions for R	eporting Purposes					
16.	What kind of debts do you have?	16a.	Are your debts primarily consume individual primarily for a personal,	ner debts? Consumer debts are defined family, or household purpose."	in 11 U.S.C. § 101(8) as "incurred by an			
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.	Are your debts primarily busines money for a business or investmen					
			□ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you owe that	at are not consumer debts or business de	bts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. Go	to line 18.				
	Do you estimate that after any exempt property is excluded and	■ Yes.		e to distribute to unsecured creditors?	is excluded and administrative expenses			
	administrative expenses are paid that funds will		□ No					
	be available for distribution to unsecured creditors?		■ Yes					
18.	How many Creditors do	<b>1</b> -49		<b>1</b> ,000-5,000	☐ 25,001-50,000			
	you estimate that you owe?	□ 50-99		☐ 5001-10,000	<u></u> 50,001-100,000			
		□ 100-199 □ 200-999		☐ 10,001-25,000 ☐ More than100,000				
		□ 200-9	99					
19.	How much do you	■ \$0 - \$50,000 □ \$50,001 - \$100,000		□ \$1,000,001 - \$10 million □ \$500,000,001	□ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?			\$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion			
		□ \$100,001 - \$500,000 □ \$500,001 - \$1 million		☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
20.	How much do you	□ \$0 - \$50,000		☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your liabilities to be?		001 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion			
			001 - \$500,000	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
		<b>□</b> \$500,	001 - \$1 million	ф 100,000,001 - ф300 million	inore than \$50 billion			
Part	7: Sign Below							
For	you	I have ex	amined this petition, and I declare u	nder penalty of perjury that the information	on provided is true and correct.			
				aware that I may proceed, if eligible, und vailable under each chapter, and I choose				
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).  I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.						
		bankrupt and 3571	I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.					
		Andrze	drzej Stanislaw Adamczył j Stanislaw Adamczyk e of Debtor 1	Signature of Debtor 2				
		Executed on February 1, 2018 Executed on MM/DD/YYYY MM/DD/YYYY						

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Debtor 1 Andrzej Stanislaw Adamczyk

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Slava Aaron Tenenbaum	Date	February 1, 2018
Signature of Attorney for Debtor		MM / DD / YYYY
Slava Aaron Tenenbaum		
Printed name		
Slava Aaron Tenenbaum. Chartered		
Firm name		
2222 Chestnut Ave.		
Ste. 201		
Glenview, IL 60026		
Number, Street, City, State & ZIP Code		
Contact phone 847-724-0300	Email address	Aaron@LawTenenbaum.com
6256760		
Bar number & State		

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		1700.11111		
Fill in this infor	mation to identify your	case:		
Debtor 1	Andrzej Stanis	slaw Adamczyk		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this
				amended fili

# Official Form 106Sum

# Summary of Your Assets and Liabilities and Certain Statistical Information

ck if this is an

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	3,064.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	3,064.00
Paı	t 2: Summarize Your Liabilities		
			liabilities Int you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	13,275.16
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	426,864.52
	Your total liabilities	\$	440,139.68
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,979.05
i.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,135.67
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your	ır other s	chedules.
7.	■ Yes What kind of debt do you have?		

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

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From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

1,979.58

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clair	n
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

				Document	Page 10 of 52		
Fill in	this inforn	nation to identif	y your case ar	nd this filing:			
Debto	or 1	Andrzei S	Stanislaw A	Adamczvk			
		First Name		Middle Name	Last Name		
Debto	or 2 e, if filing)	First Name		Middle Name	Last Name		
'							
United	d States Bar	nkruptcy Court fo	or the: NORT	HERN DISTRICT OF ILL	INOIS		
Case	number						☐ Check if this is an
					<del></del>		amended filing
Offi	cial Ea	rm 106A/I	D				
			_				
Sch	hedul	e A/B: P	roperty	/			12/15
think it informa Answe	fits best. Be ation. If more r every quest	e as complete and e space is needed tion.	l accurate as po , attach a separa	ssible. If two married peop ate sheet to this form. On t	an asset fits in more than o ble are filing together, both a he top of any additional pag	re equally responsible for	r supplying correct
Part 1	Describe I	Each Residence, I	Building, Land, o	or Other Real Estate You C	own or Have an Interest In		
1. <b>Do</b> y	you own or h	ave any legal or e	quitable interes	t in any residence, buildin	g, land, or similar property?		
	No. Go to Part	2.					
ΠY	es. Where is	s the property?					
	_						
Part 2	Describe `	Your Vehicles					
someo	one else driv rs, vans, tru No	res. If you lease a	a vehicle, also		whether they are registe Executory Contracts and U		, veriloies you own that
						Do not deduct secure	d claims or exemptions. Put
3.1	_	Dodge		Who has an interest in t	he property? Check one	the amount of any sec	cured claims on Schedule D:
		Caravan 2014		■ Debtor 1 only		Creditors Who Have C	Claims Secured by Property.
	Year: 2 Approximate		56500	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2	2 only	Current value of the entire property?	Current value of the portion you own?
	Other inform			☐ At least one of the det			<b>F</b>
						+0.00	
				Check if this is comr	nunity property	\$0.00	\$0.00
	<u> </u>			(555 mondonons)			
4. <b>Wa</b> <i>Exa</i> ■ N	<i>mples:</i> Boat No	craft, motor hous, trailers, motor	mes, ATVs and s, personal wat	d other recreational veltercraft, fishing vessels, s	nicles, other vehicles, and snowmobiles, motorcycle a	d accessories ccessories	
					from Part 2, including an		\$0.00
Part 3	Describe `	Your Personal and	d Household Ite	ems			
Do yo	ou own or h	nave any legal o	r equitable int	erest in any of the follo	wing items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
		ods and furnish jor appliances, fu		china, kitchenware			

□ No

Official Form 106A/B Schedule A/B: Property page 1

Debtor 1	Case 18-02955 Doc 1 Filed 02/01/18 Entered 02/01/18 15:19:12    Andrzej Stanislaw Adamczyk	Desc Main
_	Describe	
_ 103.	Furniture	\$250.00
□ No	es: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music including cell phones, cameras, media players, games  Describe	collections; electronic devices
Example ■ No	bles of value es: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coi other collections, memorabilia, collectibles  Describe	
Example  No	ent for sports and hobbies es: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoe musical instruments  Describe  Fishing	s and kayaks; carpentry tools;
■ No □ Yes.  11. Clother Examp	oles: Pistols, rifles, shotguns, ammunition, and related equipment  Describe	\$200.00
■ No □ Yes.  13. <b>Non-fa</b> Examp	bles: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems  Describe	, gold, silver
■ No	her personal and household items you did not already list, including any health aids you did not list  Give specific information	
	he dollar value of all of your entries from Part 3, including any entries for pages you have attached art 3. Write that number here	\$2,250.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured

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	color i Anarzej scamisi	.aw Adamczyk	Case Humber (II known	)
				claims or exemptions.
16.	Cash  Examples: Money you have in y  No  Yes	,	me, in a safe deposit box, and on hand when you file your peti	ition
17.			unts; certificates of deposit; shares in credit unions, brokerage with the same institution, list each.	houses, and other similar
	■ Yes		Institution name:	
	17.1.	. Checking	PNC Bank, account ending in 3236	\$800.00
	17.2.	. Checking	PNC business account, ending in 4208	\$14.00
18.	_ '		kerage firms, money market accounts	
	■ No □ Yes	Institution or issuer	name:	
19.	Non-publicly traded stock and joint venture ■ No	d interests in incorpo	orated and unincorporated businesses, including an intere	est in an LLC, partnership, and
	☐ Yes. Give specific information Na	n about them	 % of ownership:	
	Negotiable instruments include Non-negotiable instruments are  ■ No  □ Yes. Give specific information	personal checks, cas those you cannot tra	tiable and non-negotiable instruments hiers' checks, promissory notes, and money orders. nsfer to someone by signing or delivering them.	
21.	Retirement or pension accour  Examples: Interests in IRA, ER  No		03(b), thrift savings accounts, or other pension or profit-sharing	g plans
	☐ Yes. List each account separa Type	ately. e of account:	Institution name:	
22.	Examples: Agreements with lar	its you have made so	that you may continue service or use from a company public utilities (electric, gas, water), telecommunications compa	anies, or others
	■ No □ Yes		Institution name or individual:	
23.	. <b>Annuities</b> (A contract for a period No	odic payment of mone	y to you, either for life or for a number of years)	
	Yes Issuer nar	me and description.		
24.	. Interests in an education IRA, 26 U.S.C. §§ 530(b)(1), 529A(b), ■ No		ualified ABLE program, or under a qualified state tuition p	rogram.
		name and description	a. Separately file the records of any interests.11 U.S.C. § 521(c	s):
25.	Trusts, equitable or future into	erests in property (o	ther than anything listed in line 1), and rights or powers ex	xercisable for your benefit

Schedule A/B: Property

Official Form 106A/B

☐ Yes. Give specific information about them...

page 3

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Case number (if known) Document Andrzej Stanislaw Adamczyk Debtor 1 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ■ No ☐ Yes. Name the insurance company of each policy and list its value. Surrender or refund Company name: Beneficiary: value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No ☐ Yes. Describe each claim........ 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information..

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....

\$814.00

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

page 4

Debtor 1 An	Document  ndrzej Stanislaw Adamczyk	Page 14 of 52  Case number (if known)	
<u></u>	or have any legal or equitable interest in any business-related		
Yes. Go to			
= 163. G0 to			Current value of the portion you own? Do not deduct secured claims or exemptions.
	eceivable or commissions you already earned		
□ No ■ Yes. Des	anile a		
■ res. Des	cribe		
	A&A Flooring Corporation 50% ownership		\$0.00
39. <b>Office equi</b> Examples:  ■ No □ Yes. Des	pment, furnishings, and supplies Business-related computers, software, modems, printers, scribe	copiers, fax machines, rugs, telephones, desks, cl	hairs, electronic devices
-	fixtures, equipment, supplies you use in business, an	d tools of your trade	
■ No □ Yes. Des	scribe		
41. Inventory			
■ No			
☐ Yes. Des	cribe		
42 Interests in	partnerships or joint ventures		
No No	partition strips of joint ventures		
☐ Yes. Give	e specific information about them  Name of entity:	% of ownership:	
43. Customer I	lists, mailing lists, or other compilations		
☐ Do your list	ts include personally identifiable information (as defined in 11 l	J.S.C. § 101(41A))?	
■ No	o es. Describe		
	ess-related property you did not already list		
■ No	sss-related property you did not already list		
☐ Yes. Give	e specific information		
	Iollar value of all of your entries from Part 5, including . Write that number here		\$0.00
	e Any Farm- and Commercial Fishing-Related Property You Own or have an interest in farmland, list it in Part 1.	wn or Have an Interest In.	
46. Do you ow	n or have any legal or equitable interest in any farm- o	r commercial fishing-related property?	
No. Go to			
☐ Yes. Go	to line 47.		

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Case number (if known) Document Debtor 1 Andrzej Stanislaw Adamczyk

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ...... \$0.00 List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 ...... \$0.00 56. Part 2: Total vehicles, line 5 \$0.00 Part 3: Total personal and household items, line 15 \$2,250.00 57. Part 4: Total financial assets, line 36 58. \$814.00 59. Part 5: Total business-related property, line 45 \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 61. 62. Total personal property. Add lines 56 through 61... \$3,064.00 Copy personal property total \$3,064.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$3,064.00

Official Form 106A/B Schedule A/B: Property page 6

		17(7,7)	11 11000 100 100 100	
Fill in this inform	nation to identify your	case:		
Debtor 1	Andrzej Stanis			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)		<u> </u>		

## Official Form 106C

# Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

### Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption		
Copy the valu Schedule A/E		Check only one box for each exemption.			
Furniture Line from Schedule A/B: 6.1	\$250.00	\$250.00	735 ILCS 5/12-1001(b)		
		☐ 100% of fair market value, up to any applicable statutory limit			
Electronics Line from Schedule A/B: 7.1	\$1,500.00	\$1,500.00	735 ILCS 5/12-1001(b)		
		☐ 100% of fair market value, up to any applicable statutory limit			
Fishing Line from Schedule A/B: 9.1	\$300.00	\$300.00	735 ILCS 5/12-1001(b)		
		☐ 100% of fair market value, up to any applicable statutory limit			
Clothes Line from Schedule A/B: 11.1	\$200.00	\$200.00	735 ILCS 5/12-1001(a)		
		☐ 100% of fair market value, up to any applicable statutory limit			
Checking: PNC Bank, account ending in 3236	\$800.00	\$800.00	735 ILCS 5/12-1001(b)		
Line from Schedule A/B: 17.1		100% of fair market value, up to any applicable statutory limit			

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3.	-	claiming a homestead exemption of more than \$160,375? to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)
	No	
	Yes.	Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
		No
		Yes

Case 18-02955	Doc 1 Filed 02/01/18			19:12 Desc N	<i>l</i> lain
nis information to identify yo					
Andrzej Star First Name		Last Name			
	Middle Name	Last Name			
States Bankruptcy Court for the	NORTHERN DISTRICT OF ILLIN	NOIS			
imber				_	if this is an ded filing
	s Who Have Claims S	ecured	d by Property	У	12/15
, copy the Additional Page, fill it					
	•	chedules. Yo	ou have nothing else to	report on this form.	
es. Fill in all of the information	below.				
List All Secured Claims					
			Column A		Column C
			Amount of claim  Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
_	Describe the property that secures the	e claim:	\$13,275.16	\$0.00	\$13,275.16
	apply.	neck all that			
mber, Street, City, State & Zip Code	☐ Unliquidated				
es the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.				
•	An agreement you made (such as mo car loan)	ortgage or sec	ured		
	<u> </u>	anic's lien)			
	_ *				
	☐ Other (including a right to offset)				
	Andrzej Star First Name  States Bankruptcy Court for the sumber  Cal Form 106D  Called D: Creditors  Englete and accurate as possible. It, copy the Additional Page, fill it if known).  Creditors have claims secured it is the secured that is considered in the secured claims. If a creditor has claim. If more than one creditor has claim. If more than one creditor has claim. If more than one creditor has claim.	Andrzej Stanisław Adamczyk First Name Middle Name  Trist Name Middle Name  Al Form 106D  Andrzej Stanisław Adamczyk First Name Middle Name  Middle Name  Middle Name  Middle Name  Middle Name  NORTHERN DISTRICT OF ILLIN  Al Form 106D  Al First Name  Al Form 106D  Al Form 106D  Al First Name  Al Form 106D  Al First Name  Al Form 106D  Al First Name  Al Form 106D  Al Form 106D  Al First Name  Al Form 106D  Al First Name  Al Adamczyk  Al Adamczyk  Al Adamczyk  Al Admczyk  Al Admczy  Al Admczyk  Al Admczy  Al Admcz  Al A	Andrzej Stanislaw Adamczyk First Name Middle Name Last Name  This information to identify your case:    Andrzej Stanislaw Adamczyk   First Name Middle Name Last Name	And ready Stanislaw Adamczyk First Name Middle Name Last Name  2. Middle Name Last Name  2. Middle Name Last Name  3. States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS  3. Form 106D  3. Form 106D  4. Coulde D: Creditors Who Have Claims Secured by Property  4. Copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any addition if known).  4. Copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any addition if known).  5. Creditors have claims secured by your property?  6. Check this box and submit this form to the court with your other schedules. You have nothing else to describe the information below.  6. List All Secured Claims  1. secured Claims. If a creditor has more than one secured claim, list the creditor separately claim. Improved that one creditor has a particular claim, list the other creditor's name.  8. It is a creditor has more than one secured claims. If a creditor has a particular claim, list the other creditor's name.  8. It is a creditor has more than one secured claims. If a creditor has a particular claim, list the other creditor's name.  8. It is a creditor has more than one secured claims. If a creditor has a particular claim, list the other creditor's name.  8. It is a creditor has more than one secured claims. If a creditor has a particular claim, list the other creditor's name.  8. It is a creditor has nore than one creditor has a particular claim, list the creditor's name.  8. It is a creditor has nore than one creditor has a particular claim, list the creditor's name.  8. It is a creditor has nore than one creditor has a particular claim, list the creditor's name.  8. It is a creditor has nore than one creditor has a particular claim, list the creditor's name.  8. It is a creditor has nore than one creditor has a particular claim, list the creditor's name.  8. It is a creditor has nore than one creditor's name.  9. Do not deduct the value of collateral.  9. Do not deduct the value	Is information to identify your case:  Andrzej Stanislaw Adamczyk First Name Middle Name Last Name  States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS  Imber  Check amend  Andrzej Stanislaw Adamczyk First Name Middle Name Last Name  Check amend  Check a

If this is the last page of your form, add the dollar value totals from all pages. Part 2: List Others to Be Notified for a Debt That You Already Listed

Add the dollar value of your entries in Column A on this page. Write that number here:

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

\$13,275.16

\$13,275.16

Write that number here:

				Document	Page 19	9 of 52		
Fill in	this inform	ation to identify your	case:					
Debtor	r 1	Andrzej Stanis	law Adamo	zyk				
		First Name	Middle N	ame	Last Name			
Debtor (Spouse		First Name	Middle N	ame	Last Name			
United	States Ban	kruptcy Court for the:	NORTHERM	N DISTRICT OF IL	LINOIS			
Case r	number			_				
(if known	n)						_	heck if this is an
							] a	mended filing
Offici	ial Form	106E/F						
		/F: Creditors W	ho Have	Unsecured	Claims			12/15
any exe Schedu Schedu left. Atta	cutory contra le G: Execute le D: Credito ach the Cont	acts or unexpired leases ory Contracts and Unexp rs Who Have Claims Sec	that could resuired Leases (Of ured by Proper	ult in a claim. Also I fficial Form 106G). I ty. If more space is	ist executory of Do not include needed, copy t	Part 2 for creditors with NON contracts on Schedule A/B: I any creditors with partially the Part you need, fill it out, do not file that Part. On the t	Property (Officine secured claims number the entite of the control of the contr	al Form 106A/B) and on that are listed in tries in the boxes on the
Part 1	List All	of Your PRIORITY Un	secured Clai	ms				
	-	rs have priority unsecure	d claims agains	st you?				
	No. Go to Pa	art 2.						
	Yes.							
Part 2	List All	of Your NONPRIORIT	Y Unsecured	Claims				
3. Do	any creditor	rs have nonpriority unsec	ured claims ag	gainst you?				
	No. You have	e nothing to report in this pa	art. Submit this t	form to the court with	your other sche	edules.		
	Yes.							
uns tha	secured claim	, list the creditor separately	for each claim.	For each claim listed	d, identify what t	pholds each claim. If a credit ype of claim it is. Do not list cl three nonpriority unsecured c	aims already inc	luded in Part 1. If more
								Total claim
4.1		n Central Pathol	ogy	Last 4 digits of acc	ount number	1381		\$1,706.00
	520 E.	Creditor's Name 22nd St. d, IL 60148		When was the deb	t incurred?	11/05/2017-11/14	/2017	-
	Number Str	reet City State Zlp Code red the debt? Check one.		As of the date you	file, the claim i	s: Check all that apply		
	■ Debtor 1	1 only		☐ Contingent				
	Debtor 2	•		☐ Unliquidated				
		1 and Debtor 2 only		☐ Disputed				
		one of the debtors and and	other	Type of NONPRIOR	RITY unsecured	d claim:		
		f this claim is for a comr		☐ Student loans				
	debt		•			ration agreement or divorce th	nat you did not	
	_	n subject to offset?		report as priority clai				
	■ No			-	•	g plans, and other similar deb	ts	
	☐ Yes			Other. Specify	Medical			-

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Debt	or1 Andrzej Stanislaw Adamczyk		Case number (if know)				
4.2	Addison Central Pathology	Last 4 digits of account number		\$775.00			
	Nonpriority Creditor's Name 520 E. 22nd St.	When was the debt incurred?					
	Lombard, IL 60148						
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	Debtor 1 only	O continuent					
	′	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure	d claim:				
	☐ At least one of the debtors and another☐ Check if this claim is for a community	Student loans	<del></del>				
	debt	_	aration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims					
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts				
	Yes	■ Other. Specify Medical					
4.3	Capital One	Last 4 digits of account number	8722	\$2,660.00			
	Nonpriority Creditor's Name	_		·			
	15000 Capital One Dr Richmond, VA 23238	When was the debt incurred?	Opened 10/05 Last Active 11/07/17				
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	□ Debtor 1 and Debtor 2 only □ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims					
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts				
	☐ Yes	Other. Specify Charge Ac					
4.4	Capital One	Last 4 digits of account number	6789	\$2,142.00			
	Nonpriority Creditor's Name  15000 Capital One Dr	When was the debt incurred?	Opened 12/11 Last Active 11/18/17				
	Richmond, VA 23238  Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.	As of the date you me, the claim	is. Oneck all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure					
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts				
	Yes	■ Other Specify Credit Ca	ard				

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Cardiac Surgery Associates, SC	Last 4 digits of account number 0385	\$16,745.5
Nonpriority Creditor's Name p.o.bOX 153	When was the debt incurred? 11/06/2017	
Channahon, IL 60410		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	_	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical	
City of Chicago	Last 4 digits of account number 7416	\$1,342.0
Nonpriority Creditor's Name 33589 Treasury Center	When was the debt incurred?	
Chicago, IL 60694  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical	
Community First Medical	Last 4 digits of account number 3933	¢000
Center Nonpriority Creditor's Name	Last 4 digits of account number	\$999.0
P.O.Box 366	When was the debt incurred?	
Hinsdale, IL 60522 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you file, the claim is. Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
☐Yes	Other Specify Medical	

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Debtor 1 Andrzej Stanislaw Adamczyk Community First Medical \$996.00 4.8 Last 4 digits of account number 3933 Center Nonpriority Creditor's Name P.O.Box 366 When was the debt incurred? Hinsdale, IL 60522 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Medical Community First Medical 4104 \$62,027.00 4.9 Last 4 digits of account number Center Nonpriority Creditor's Name 5645 W. Addison St. When was the debt incurred? 11/2017 Chicago, IL 60634 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Medical Credence Resource Management 4.1 8353 \$10,120.00 0 Last 4 digits of account number Nonpriority Creditor's Name P.O.Box 2267 When was the debt incurred? Southgate, MI 48195 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Medical

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Page 23 of 52 Case number (if know) Debtor 1 Andrzej Stanislaw Adamczyk DEV Medical Associates SC \$1,242.00 0452 Last 4 digits of account number Nonpriority Creditor's Name 5600 W. Addison St. When was the debt incurred? Suite 400 Chicago, IL 60634 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community deht ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Medical 4.1 Discover Fin Svcs Llc \$3,772.00 Last 4 digits of account number 8122 Nonpriority Creditor's Name Opened 05/12 Last Po Box 15316 When was the debt incurred? Active 12/07/17 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other Specify Credit Card Midwest Imaging 1843 \$45.00 3 Professionals Last 4 digits of account number Nonpriority Creditor's Name 2490 W. 26th Ave. When was the debt incurred? 11/14/2017 Ste 220A Denver, CO 80211 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Medical

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Debli	or i Andrzej Stanisław Adamczyk	Case number (if know)	
4.1 4	Midwest Imaging Professionals	Last 4 digits of account number 0831	\$83.00
	Nonpriority Creditor's Name 2490 W. 26th Ave Ste 220A	When was the debt incurred?	
	Denver, CO 80211  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical	
4.1 5	Midwest Imaging Professionals	Last 4 digits of account number 1135	\$248.00
	Nonpriority Creditor's Name 2490 W. 26th Ave. Ste 220A Denver, CO 80211	When was the debt incurred?	
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical	
4.1 6	Midwest Imaging Professionals Nonpriority Creditor's Name	Last 4 digits of account number 0759	\$76.00
	2490 W. 26th Ave. Ste 220A	When was the debt incurred?	
	Denver, CO 80211  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	• ,	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical	

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Debtor 1 Andrzej Stanislaw Adamczyk Midwest Imaging \$38.00 Last 4 digits of account number 8483 Professionals Nonpriority Creditor's Name 2490 W. 26th Ave. When was the debt incurred? Ste 220A Denver, CO 80211 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Medical 4.1 Midwest Imaging \$76.00 4104 Last 4 digits of account number 8 Professionals Nonpriority Creditor's Name 2490 W. 26th Ave. When was the debt incurred? Ste 220A Denver, CO 80211 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Medical 4.1 Midwest Imaging 0153 \$176.00 9 Last 4 digits of account number Professionals Nonpriority Creditor's Name 2490 W. 26th Ave. When was the debt incurred? Ste 220A Denver, CO 80211 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim:  $\square$  At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Medical

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Debt	or1 Andrzej Stanislaw Adamczyk	Case number (if know)				
4.2 0	Northstar Anesthesia of Illinois LL	Last 4 digits of account number 1381	\$10,230.00			
	Nonpriority Creditor's Name P.O.Box 612485 Dallas, TX 75261	When was the debt incurred? 11/06/2017				
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts				
	□ Yes	Other. Specify Medical				
4.2 1	Northwest Pulmonary Assoc.	Last 4 digits of account number 4407	\$1,170.00			
	Nonpriority Creditor's Name	<del></del>				
	7447 W. Talcott Ave Suite 542	When was the debt incurred?				
	Chicago, IL 60631					
	Number Street City State Zlp Code					
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	Other. Specify Medical				
4.2 2	Resurrection Medical Center	Last 4 digits of account number 8483	\$299,912.02			
_	Nonpriority Creditor's Name 7435 West Talcott Ave	When was the debt incurred? 11/2017				
	Chicago, IL 60631  Number Street City State Zlp Code	As of the date you file the claim is Check all that apply				
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	□ Yes	■ Other. Specify Medical				
		— Other, openly				

Debtor 1	Andrzej Stanislaw		Page 27 of 52 Case number (if know)	.z Desc Main
4.2				

4.2	RMC Cardiology	Last 4 digits of account number 1381	\$164.00
	Nonpriority Creditor's Name 520 E. 22nd St Lombard, IL 60148 Number Street City State Zlp Code	When was the debt incurred?  As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	5.00 S. 1.00 S.	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical	
4.2	Superioe Ambulance Service  Nonpriority Creditor's Name P.O.Box 1407 Elmhurst, IL 60126 Number Street City State Zip Code	Last 4 digits of account number 2938  When was the debt incurred?  As of the date you file, the claim is: Check all that apply	\$10,120.00
	Who incurred the debt? Check one.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical	

## Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

## Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
Total	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 426,864.52

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Debtor 1 Andrzej Stanislaw Adamczyk

Total Nonpriority. Add lines 6f through 6i.

6j. \$ 426,864.52

Fill in this infor	mation to identify your	case:		
Debtor 1	Andrzej Stanis	slaw Adamczyk Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
, , , , ,	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

# Official Form 106G

# Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

F	Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	Malgorzata Gut 1440 Marilyn Ct. Rolling Meadows, IL 60008	Lease 10-01-2017 through 09-30-2018

		Docume	nt Page 30 d	コ 52	
Fill in this i	information to identify your				
Debtor 1	Andrzej Stanis	slaw Adamczyk			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	g) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
O					
Case numb					☐ Check if this is an amended filing
Official	Form 106H				amended ming
	ule H: Your Cod	ebtors			12/15
ill it out, an vour name :  1. Do y  No Yes  2. With Arizona  No. ( Yes.	nd number the entries in the and case number (if known) you have any codebtors? (If him the last 8 years, have you a, California, Idaho, Louisiana Go to line 3.  Did your spouse, former spoutant 1, list all of your codebt	boxes on the left. Attach Answer every question. you are filing a joint case, of I lived in a community pro Nevada, New Mexico, Pur use, or legal equivalent live	the Additional Page to do not list either spouse operty state or territor erto Rico, Texas, Wash with you at the time?	e as a codebtor.  ry? (Community property ington, and Wisconsin.)	g with you. List the person shown
Form 1 out Co	l06D), Schedule E/F (Officia lumn 2.			06G). Use Schedule D,	ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor lame, Number, Street, City, State and Z	IP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
N	Number Street City	State	ZIP Code	☐ Schedule D, lind ☐ Schedule E/F, I ☐ Schedule G, lind	ine
_	Name			☐ Schedule D, line ☐ Schedule E/F, I ☐ Schedule G, line	ine
	Number Street Dity	State	ZIP Code		

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Debtor 1 Andrzej Stanisław Adamczyk  Debtor 2 Scase number (If krown)  United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS  Case number (If krown)  Official Form 106!  Schedule I: Your Income  Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for uspulpying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question cast a separate page with information.  If you have more than one job, attach a separate page with information.  If you have more than one job, attach a separate page with information.  Occupation Married Self-employed depart-line, seasonal, or self-employed work.  Occupation may include student or homemaker, if it applies.  Employer's name  A & A Flooring, Corp.  Employer's name  A & A Flooring, Corp.  Self-employed carpenter  Include part-line, seasonal, or self-employed depart-line, seasonal, or self-employed work.  Cocupation may include student or homemaker, if it applies.  Employer's name  A & A Flooring, Corp.  Employer's name  A & A Flooring, Corp.  Self-employed there?  It years  Employer's name  A & A Flooring, Corp.  Self-employed carpenter  Include part-line, seasonal, or self-employed departer  Include part-line, seasonal, or self-employed work.  Employer's name  A & A Flooring, Corp.  Employer's name  A & A Flooring, Corp.  Employer self-employed work.  For Debtor 1 probetor 2 or non-filing spouse work that person on the lines below. If you need more space, attach a separate sheet to this form.  For Debtor 1 probetor 2 or non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.  For Debtor 1 probetor 2 or non-filing	E:II	in this information to identify	2001				1				
Debtor 2   Spouse, If firing		· · ·									
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS    Case number	Det	otor1 Andrzej St	canislaw Adamczyk	<u> </u>		_					
Case number (If known)    Check if this is:   An amended filling   An am											
Official Form 106  Schedule I: Your Income  Be as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filling jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filling with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question  Part 1: Describe Employment  1. Fill in your employment information.  Bettin to possible for the properties of the propert	Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS							
Schedule I: Your Income  Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If more space is needed, attach a separate had your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate had better this form. On the top of any additional pages, write your name and case number (if known). Answer every question  Part 1:  Describe Employment  1. Fill in you remployment information.  If you have more than one job, attach a separate page with information about additional employers.  Include part-time, seasonal, or self-employed work.  Occupation may include student or homemaker, if it applies.  Employer's address  Self-employed carpenter  In years  Employer's address  Self-employed carpenter  For Debtor 1 for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.  If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.  For Debtor 1 for Debtor 2 or non-filing spouse  List monthly gr				-			□ Ar	n amende suppleme	d filing ent showin		chapter
Schedule I: Your Income  Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If more space is needed, attach a separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question  Part 1:  Describe Employment  1. Fill in you remployment information.  If you have more than one job, attach a separate page with information about additional employers.  Occupation  Self-employed carpenter  Employed work.  Occupation may include student or homemaker, if it applies.  Employer's address  Self-employed carpenter  Employer's name  A & A Flooring, Corp.  Employer's address  Self-employed carpenter  Employer's address  Self-emplo	$\bigcirc$	fficial Form 106I								ollowing date:	_
Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are separated and your spouse is not filing biointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question information.  If you have more than one job, attach a separate page with information about additional employers.  Occupation  Employment status  Occupation  Self-employed carpenter  Employer's name  Employer's name  A & A Flooring, Corp.  Employer's address  or homemaker, if it applies.  Find Describe Employer and the status information and include student or homemaker, if it applies.  Find Describe Employer and the status information and include student or homemaker, if it applies.  Find Describe Employer and E			omo				М	M / DD/ Y	YYY		40/4/
1. Fill in your employment information.  If you have more than one job, attach a separate page with information about additional employers.  Include part-time, seasonal, or self-employed work.  Occupation  Cocupation  Coc	sup <sub> </sub> spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form.	are married and not filing w	ng jointly, and your ith you, do not inclu	spouse de infor	is liv mati	ring with yon about	you, inclu your spo	ude inforr ouse. If m	nation about y ore space is n	our eeded,
If you have more than one job, attach a separate page with information about additional employers.    Include part-time, seasonal, or self-employed work.   Cocupation   Employer's name   Employer's name   Self-employed carpenter   Employer's address   Self-employed carpenter   Self-employed carpenter   Employer's address   Self-employed carpenter   Employer   Not employed   No											
attach a separate page with information about additional employers.  Occupation  Self-employed carpenter  Include part-time, seasonal, or self-employed work.  Occupation may include student or homemaker, if it applies.  Employer's address  Thou long employed there?  Include part-time, seasonal, or self-employed work.  Employer's name  Employer's name  A & A Flooring, Corp.  Employer's address  Chicago, IL 60634  How long employed there?  Include part-time, seasonal, or self-employed carpenter  Employer's address  Seasonal, Corp.  Employer's address  Seasonal, Corp.  Employer's address  Chicago, IL 60634  How long employed there?  In years  Part 2:  Give Details About Monthly Income  Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.  If you or your non-filling spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.  For Debtor 1  For Debtor 2 or non-filling spouse  List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.  2. \$ 0.00 \$ N/A  3. Estimate and list monthly overtime pay.  3. +\$ 0.00 +\$ N/A				Debtor 1				_		ling spouse	
information about additional employers.  Occupation  Self-employed carpenter  Include part-time, seasonal, or self-employed work.  Occupation may include student or homemaker, if it applies.  Employer's address  5636 W. Cullom Ave. Chicago, IL 60634  How long employed there?  11 years  Part 2: Give Details About Monthly Income  Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.  If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.  For Debtor 1 For Debtor 2 or non-filing spouse  List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.  2. \$ 0.00 \$ N/A  3. Estimate and list monthly overtime pay.  3. +\$ 0.00 +\$ N/A			Employment status	■ Employed				_			
Include part-time, seasonal, or self-employed work.  Occupation may include student or homemaker, if it applies.  Employer's address  Chicago, II 60634  How long employed there?  In years  Part 2: Give Details About Monthly Income  Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.  If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.  For Debtor 1  For Debtor 2 or non-filing spouse  List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.  2. \$ 0.00 \$ N/A  N/A  Setimate and list monthly overtime pay.		information about additional		☐ Not employed	☐ Not employed			☐ Not employed			
Self-employed work.  Occupation may include student or homemaker, if it applies.  Employer's address  Chicago, IL 60634  How long employed there?  Il years  Give Details About Monthly Income  Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.  If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.  For Debtor 1  For Debtor 2 or non-filing spouse  List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.  2. \$ 0.00 \$ N/A  3. Estimate and list monthly overtime pay.  3. +\$ 0.00 +\$ N/A			Occupation	Self-employe	d carp	ent	er				
How long employed there? 11 years    For Debtor 1   For Debtor 2 or non-filling spouse space, attach a separate sheet to this form. If you grow space, attach a separate sheet to this form.  List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.    Solution Ave. Chicago, IL 60634			Employer's name	A & A Floori	ng, Co	rp.					
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.  If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.  For Debtor 1  For Debtor 2 or non-filing spouse  2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.  2. \$ 0.00 \$ N/A  3. Estimate and list monthly overtime pay.  3. +\$ 0.00 +\$ N/A			Employer's address								
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.  If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.  For Debtor 1  For Debtor 2 or non-filing spouse  2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.  2. \$\( \) 0.00 \( \)			How long employed t	here? 11 yea	ars			_			
spouse unless you are separated.  If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.  For Debtor 1  For Debtor 2 or non-filing spouse  2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.  2. \$\( \bigcup_{0.00} \) \( \bigcup_{N/A} \)  3. Estimate and list monthly overtime pay.  3. +\$\( \bigcup_{0.00} \) +\$\( \bigcup_{N/A} \)	Par	t 2: Give Details About Mor	nthly Income								
List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.  2. \$\frac{0.00}{\text{s}} \frac{\text{N/A}}{\text{N/A}}\$  3. Estimate and list monthly overtime pay.	<b>Esti</b> spou	mate monthly income as of the dause unless you are separated.	ate you file this form. If	you have nothing to r	eport for	any	line, write	\$0 in the	space. In	clude your non-	filing
List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.  2. \$ 0.00 \$ N/A  3. Estimate and list monthly overtime pay.  3. +\$ 0.00 +\$ N/A				ombine the informatio	n for all e	emplo	oyers for t	hat perso	n on the li	nes below. If yo	ou need
2. deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$0.00 \$N/A \$ 3. Estimate and list monthly overtime pay. 3. +\$0.00 +\$N/A \$							For Deb	tor 1			
	2.				2.	\$		0.00	\$	N/A	
4. Calculate gross Income. Add line 2 + line 3. 4. \$ \$ \$ \$	3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	
	4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	(	0.00	\$	N/A	

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Debtor 1	1 <u>Andrzej Stanislaw Adamczyk</u>		Case	number (if known)			
			For	Debtor 1	For Debto		
_					non-filing		
C	opy line 4 here	4.	\$_	0.00	\$	N/A	
5. <b>Li</b>	ist all payroll deductions:						
5a	a. Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	N/A	
5b		5b.	\$	0.00	\$	N/A	
50	c. Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A	
50	d. Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A	
5e		5e.	\$	0.00	\$	N/A	
5f	f. Domestic support obligations	5f.	\$	0.00	\$	N/A	
50		5g.	\$_	0.00	\$	N/A	
5h	h. Other deductions. Specify:	5h.+	\$_	0.00	+ \$	N/A	
	dd the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	0.00	\$	N/A	
7. <b>C</b> a	alculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	0.00	\$	N/A	
8a 8b	profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  b. Interest and dividends	8a. 8b.	\$_ \$_	1,979.05 0.00	\$ 	N/A N/A	
80		nt					
8c 8e 8f	e. Social Security	8c. 8d. 8e.	\$_ \$_ \$_	0.00 0.00 0.00	\$ \$	N/A N/A N/A	
0.0	Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  Pension or retirement income	8f.	\$_	0.00	\$	N/A N/A	
8g 8h	g. Pension or retirement income h. Other monthly income. Specify:	8g. 8h.+	\$_ \$	0.00	\$ + \$	N/A N/A	
0.					. —	21,722	
9. <b>A</b>	dd all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	1,979.05	\$	N/A	
	calculate monthly income. Add line 7 + line 9.  dd the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	1,	,979.05 <b>+ \$</b> _	N/A	<u> </u>	.05
In ot Do	tate all other regular contributions to the expenses that you list in <i>Schedu</i> clude contributions from an unmarried partner, members of your household, you ther friends or relatives.  To not include any amounts already included in lines 2-10 or amounts that are not pecify:	ur depen			ed in <i>Schedu</i>		0.00
W	dd the amount in the last column of line 10 to the amount in line 11. The reduced that amount on the Summary of Schedules and Statistical Summary of Centroplies					\$ 1,979	0.05
13. <b>D</b> e	o you expect an increase or decrease within the year after you file this form.  No.	m?				Combined monthly inco	me
10. <b>D</b>	_ `						

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Fill i	n this informa	tion to identify yo	our case:						
Debt	or 1	Andrzej St	anislav	v Adamczyk			ck if this is: An amended filing		
Debt	or 2 use, if filing)					•	wing postpetition chapter the following date:		
Unite	ed States Bankı	ruptcy Court for the	: NORTH	ERN DISTRICT OF ILLIN	OIS	-	MM / DD / YYYY		
	e number nown)								
Of	ficial Fo	rm 106J							
Sc	hedule	J: Your	Exper	nses				12 <i>/</i> ·	15
Be a	as complete rmation. If m ber (if know 1: Desci	and accurate as nore space is ne n). Answer eve ribe Your House	s possible eded, atta ry questio	. If two married people ar ich another sheet to this					
1.	Is this a joir	nt case?							
	■ No. Go to		in a separ	ate household?					
	□ N □ Y	-	st file Offici	al Form 106J-2, <i>Expense</i> s	for Separate House	ehold of Deb	tor 2.		
2.	Do you hav	e dependents?	■ No						
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debto		Dependent's age	Does dependent live with you?	
	Do not state dependents							□ No □ Yes □ No □ Yes □ No □ Yes □ No □ Yes □ No	
3.	expenses o yourself an	penses include f people other t d your depende	han ents?	No Yes				☐ Yes	
expe	mate your ex		our bankr	y Expenses uptcy filing date unless y y is filed. If this is a supp					;
the		h assistance an		government assistance i cluded it on <i>Schedule I:</i> Y			Your exp	enses	
4.		or home owners		ses for your residence. In	nclude first mortgag	e 4. \$	s	720.00	
	If not include	led in line 4:							
	4a. Real	estate taxes				4a. \$	S	0.00	
		rty, homeowner's				4b. \$		0.00	
		maintenance, re owner's associa		upkeep expenses		4c. \$ 4d. \$		0.00	
5.				oominium dues our residence, such as ho	me equity loans	4d. \$ 5. \$		0.00	

5. Additional mortgage payments for your residence, such as home equity loans

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Debtor 1 A	ndrzej Stanislaw Adamczyk	Case num	ber (if known)	
6. <b>Utilities</b>	:			
6a. El	lectricity, heat, natural gas	6a.	\$	35.00
	/ater, sewer, garbage collection	6b.		0.00
	elephone, cell phone, Internet, satellite, and cable services	6c.		100.00
	ther. Specify:	6d.	· -	0.00
			*	750.00
	nd housekeeping supplies	7.	·	
	re and children's education costs	8.	\$	0.00
	g, laundry, and dry cleaning	9.		0.00
	al care products and services	10.	\$	25.00
	and dental expenses	11.	\$	80.00
<ol><li>Transport</li></ol>	ortation. Include gas, maintenance, bus or train fare.			
	nclude car payments.	12.	\$	25.00
	inment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
	ble contributions and religious donations	14.		0.00
5. <b>Insuran</b>			Ψ	0:00
	nclude insurance deducted from your pay or included in lines 4 or 20.			
		45-	œ.	0.00
	fe insurance	15a.		0.00
	ealth insurance	15b.	· <del></del>	0.00
15c. V	ehicle insurance	15c.	•	68.00
	ther insurance. Specify:	15d.	\$	0.00
6. <b>Taxes</b> . [	Do not include taxes deducted from your pay or included in lines 4 or 20.			
Specify:		16.	\$	0.00
	nent or lease payments:		Ψ	
	ar payments for Vehicle 1	17a.	¢	332.67
			· —	
	ar payments for Vehicle 2	17b.		0.00
17c. O	ther. Specify:	17c.		0.00
17d. O	ther. Specify:	17d.	\$	0.00
<ol> <li>Your pa</li> </ol>	lyments of alimony, maintenance, and support that you did not report a	s		
	ed from your pay on line 5, Schedule I, Your Income (Official Form 106I)		\$	0.00
	ayments you make to support others who do not live with you.		\$	0.00
Specify:		19.	·	
	eal property expenses not included in lines 4 or 5 of this form or on Sci		our Income	
				0.00
	ortgages on other property	20a.		
	eal estate taxes	20b.	· -	0.00
	roperty, homeowner's, or renter's insurance	20c.		0.00
	aintenance, repair, and upkeep expenses	20d.		0.00
20e. H	omeowner's association or condominium dues	20e.		0.00
1. Other: 9	Specify:	21.	+\$	0.00
<ol><li>Calcula</li></ol>	te your monthly expenses			
22a. Add	d lines 4 through 21.		\$	2,135.67
	py line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	·
			·	
22c. Add	d line 22a and 22b. The result is your monthly expenses.		\$	2,135.67
0 001	to vous monthly not income			
	te your monthly net income.		•	
	opy line 12 (your combined monthly income) from Schedule I.	23a.	\$	1,979.05
23b. C	opy your monthly expenses from line 22c above.	23b.	-\$	2,135.67
23c. S	ubtract your monthly expenses from your monthly income.		1.	
	he result is your monthly net income.	23c.	\$	-156.62
"			1	
For exam	expect an increase or decrease in your expenses within the year after yould be used to finish paying for your car loan within the year or do you expect you ion to the terms of your mortgage?			e or decrease because of a
☐ Yes.	Explain here:			

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						I
Fill in th	is information to ide	ntify your ca	se:			
Debtor 1	Andrzej	Stanisl	aw Adamczyk			
	First Name		Middle Name	Last Name		
Debtor 2	·		Middle Name	Last Name		
(Spouse if,	illing) First Name		Middle Name	Last Name		
United S	states Bankruptcy Cou	rt for the:	NORTHERN DISTRICT	OF ILLINOIS		
Caaa 211	mhar					
Case nu (if known)	<u></u>					☐ Check if this is an
						amended filing
						•
Officia	I Form 106Dec	;				
Decl	aration Ab	out ar	Individual	<b>Debtor's So</b>	chedules	12/15
<u> </u>		<del>out ai</del>	IIIaiviaaai	DODIOI O O	<del>onoutico</del>	12/13
If two ma	arried people are filin	a toaether. b	ooth are equally respon	nsible for supplying co	rrect information.	
				, 0		
						tement, concealing property, or 100, or imprisonment for up to 20
vears, or	both. 18 U.S.C. §§ 1	52, 1341, 151	9, and 3571.	ruptcy case can result	in fines up to \$250,0	ou, or imprisonment for up to 20
, , .		, - , -	.,			
	Sign Below					
Did	I you pay or agree to	pay someon	e who is NOT an attor	ney to help you fill out	bankruptcy forms?	
	No					
	Yes. Name of perso	n			Attach Bar	nkruptcy Petition Preparer's Notice,
_	·	-			Declaration	n, and Signature (Official Form 119)
Und	ler penalty of periury	I declare th	at I have read the sum	mary and schedules fil	ed with this declarati	ion and
	they are true and co					
v	/ / 7 1 1 2		1	v		
Χ.	/s/ Andrzej Sta Andrzej Stanis		_	X Signature o	of Dobtor 2	
	Signature of Debtor 1	raw AudillC	2 y r	Signature o	N Denioi Z	
	2.3.3.3.0 0. 200.01					
	Date February	1, 2018		Date		

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Fill i	n this inform	ation to identify you	r case:			
Debt	tor 1		islaw Adamczyk			
Debt	tor 2	First Name	Middle Name	Last Name		
	se if, filing)	First Name	Middle Name	Last Name		
Unite	ed States Bar	kruptcy Court for the:	NORTHERN DISTRICT (	OF ILLINOIS		
Cook						
(if kno	e number				_	Check if this is an mended filing
∩ff	icial For	m 107				
			Affairs for Individ	duals Filing for B	ankruptcy	4/16
infori	mation. If mo	ore space is needed, ). Answer every que	ible. If two married people a , attach a separate sheet to stion. arital Status and Where You	this form. On the top of any		
		current marital statu				
	_					
	■ Married ■ Not married	ried				
<b>2.</b>	During the la	st 3 years, have you	lived anywhere other than	where you live now?		
	■ No	all of the places were	Prod State Inst Occasion Decision	et Seekeele vale van de Seekeele van de Seekee		
	⊔ Yes. List	all of the places you	lived in the last 3 years. Do no	ot include where you live now		
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
			ver live with a spouse or legalifornia, Idaho, Louisiana, Ne			
	■ No					
1	_	ke sure you fill out Sc	hedule H: Your Codebtors (Of	fficial Form 106H).		
Part	2 Explain	n the Sources of You	ır Income			
l	Fill in the total	I amount of income yo	mployment or from operatin ou received from all jobs and a have income that you receive	all businesses, including part-	time activities.	ndar years?
	□ No					
ĺ	_	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		year before that: cember 31, 2016)	☐ Wages, commissions, bonuses, tips	\$6,270.00	☐ Wages, commissions, bonuses, tips	
			Operating a business		☐ Operating a business	

Official Form 107

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Debtor 1 Andrzej Stanislaw Adamczyk

		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		☐ Wages, commissions, bonuses, tips	\$10,436.50	☐ Wages, commissions, bonuses, tips	
		Operating a business		☐ Operating a business	
		31, 2015 ) ☐ Wages, commissions, bonuses, tips	\$7,770.00	☐ Wages, commissions, bonuses, tips	
		Operating a business		☐ Operating a business	
		☐ Wages, commissions, bonuses, tips	\$6,050.00	☐ Wages, commissions, bonuses, tips	
		Operating a business		☐ Operating a business	
■ No			ately. Do not include income th	nat you listed in line 4.	
		Debtor 1		Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
3: List	: Certain Pa	syments You Made Before You Filed for	,		
□ No.	Neither Do individual puring the No. Yes	ebtor 1 nor Debtor 2 has primarily consprimarily for a personal, family, or househouse 90 days before you filed for bankruptcy, of Go to line 7.  List below each creditor to whom you papaid that creditor. Do not include payment include payments to an attorney for to adjustment on 4/01/19 and every 3 year	sumer debts. Consumer debts old purpose."  did you pay any creditor a total aid a total of \$6,425* or more in the total of this bankruptcy case.  ars after that for cases filed on	of \$6,425* or more?  In one or more payments and to ations, such as child support a	he total amount you and alimony. Also, do
Yes.				of \$600 or more?	
	■ No.				
	☐ Yes	Go to line 7.			
	Did you re Include into and other winnings.  List each s No Yes.	Did you receive any Include income regard and other public bene winnings. If you are fill List each source and	Sources of income Check all that apply.    Wages, commissions, bonuses, tips   Operating a business     Wages, commissions, bonuses, tips   Wages, commissions, bonuses, tips   Operating a business     Wages, commissions, bonuses, tips   Operating a business     Wages, commissions, bonuses, tips   Operating a business     Operating a business	Sources of income Check all that apply.    Wages, commissions, bonuses, tips   Operating a business	Sources of income Check all that apply.    Wages, commissions, bonuses, tips   Wages, commissions, bonuses, tips   Wages, commissions, bonuses, tips   Wages, commissions, bonuses, tips   Operating a business   Operating a busines

**Total amount** 

paid

Amount you

still owe

**Dates of payment** 

**Creditor's Name and Address** 

Was this payment for ...

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7.	Within 1 year before you filed for bankrupto Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	rtners; relatives of any gen control, or owner of 20% o	eral partners; partner r more of their votin	erships of which yog g securities; and a	ou are a genera ny managing a	al partner; corporations gent, including one fo
	■ No					
	Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
3.	Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cos		ments or transfer a	any property on a	ccount of a d	ebt that benefited an
	■ No					
	☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment litor's name
Pai	rt 4: Identify Legal Actions, Repossession	ns. and Foreclosures				
).	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes.  No Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of th	e case
10.	Within 1 year before you filed for bankruptor. Check all that apply and fill in the details below.  ■ No. Go to line 11.  □ Yes. Fill in the information below.		erty repossessed, f	foreclosed, garnis	shed, attached	d, seized, or levied?
	Creditor Name and Address	Describe the Property		Date		Value of the property
		Explain what happened	i			property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca  ■ No □ Yes. Fill in the details.		luding a bank or fi	nancial institutior	n, set off any a	nmounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date taker	action was	Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or all No ☐ Yes		erty in the possess	ion of an assigne	e for the bene	efit of creditors, a
Pai	t 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrup  ■ No	tcy, did you give any gift	s with a total value	of more than \$60	00 per person	?
	☐ Yes. Fill in the details for each gift.					
	Gifts with a total value of more than \$600 per person	Describe the gifts		Date: the g	s you gave ifts	Value
	Person to Whom You Gave the Gift and Address:					

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14.	Within 2 years before you filed for bankru		, - , ,	ns with a tota	I value of more than	\$600 to any charity?
	☐ Yes. Fill in the details for each gift or co Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code	otal	Describe what you contributed		Dates you contributed	Value
Par	t 6: List Certain Losses					
15.	Within 1 year before you filed for bankrup or gambling?	otcy or	since you filed for bankruptcy, did y	ou lose anyt	hing because of the	ft, fire, other disaster
	■ No □ Yes. Fill in the details.					
	Describe the property you lost and how the loss occurred	Include	be any insurance coverage for the log the amount that insurance has paid. Log claims on line 33 of Schedule A/B:	ist pending	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfers	;				
16.	Within 1 year before you filed for bankrup consulted about seeking bankruptcy or process linclude any attorneys, bankruptcy petition p	reparii	ng a bankruptcy petition?	. ,	,, ,	erty to anyone you
	■ No □ Yes. Fill in the details.					
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y	ou	Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment
17.	Within 1 year before you filed for bankrup promised to help you deal with your cred Do not include any payment or transfer that	otcy, di litors o	r to make payments to your creditor		r transfer any prope	erty to anyone who
	No					
	☐ Yes. Fill in the details.					
	Person Who Was Paid Address		Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankru transferred in the ordinary course of you include both outright transfers and transfers include gifts and transfers that you have alrest No	r busin made a	ess or financial affairs? as security (such as the granting of a s			
	Yes. Fill in the details.  Person Who Received Transfer		Description and value of	Describe :	any property or	Date transfer was
	Address		property transferred		received or debts	made
	Person's relationship to you					
19.	Within 10 years before you filed for bank beneficiary? (These are often called asset ■ No □ Yes. Fill in the details.			elf-settled tru	ıst or similar device	of which you are a
	Name of trust		Description and value of the prope	erty transferr	ed	Date Transfer was made

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Debtor 1 Andrzej Stanislaw Adamczyk

Dor	t 8: List of Certain Financial Accounts, In	actrumento. Safa Danaci	t Payas and St	torogo Uni	40	
	Within 1 year before you filed for bankruptous sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asso	cy, were any financial ac	counts or instints; certificates	ruments he	eld in your name, or for	
	Yes. Fill in the details.  Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of acco instrument	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities cash, or other valuables?					
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?
22.	Have you stored property in a storage unit  No	or place other than you	home within 1	l year befo	re you filed for bankrup	tcy?
	Yes. Fill in the details.  Name of Storage Facility	Who else has or l	had access	Describe	the contents	Do you still
	Address (Number, Street, City, State and ZIP Code)	to it? Address (Number, S State and ZIP Code)		2001180		have it?
Par	t 9: Identify Property You Hold or Contro	I for Someone Else				
23.	Do you hold or control any property that so for someone.	omeone else owns? Incl	ude any proper	rty you bor	rowed from, are storing	for, or hold in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value
Par	t 10: Give Details About Environmental Inf	formation				
For	the purpose of Part 10, the following definit	ions apply:				
	Environmental law means any federal, state toxic substances, wastes, or material into regulations controlling the cleanup of thes	the air, land, soil, surfac	e water, ground			
	Site means any location, facility, or propert to own, operate, or utilize it, including disp	•	environmental	law, wheth	ner you now own, opera	te, or utilize it or used
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.					
Rep	ort all notices, releases, and proceedings th	nat you know about, rega	ardless of whe	n they occ	urred.	
24.	4. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?					

No

Name of site

☐ Yes. Fill in the details.

Address (Number, Street, City, State and

Governmental unit

ZIP Code)

Address (Number, Street, City, State and ZIP Code)

Date of notice

Environmental law, if you

know it

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25.	Have you notified any governmen	ntal unit of an	ny release of hazardous material?				
	■ No						
	Yes. Fill in the details.						
	Name of site		Governmental unit		Environme	ntal law, if you	Date of notice
	Address (Number, Street, City, State and	d ZIP Code)	Address (Number, Street, City, State at ZIP Code)		know it	······· , ·· <b>, ·</b> · ·	
26.	Have you been a party in any judi	cial or admir	nistrative proceeding under any env	vironm	ental law?	Include settlements	and orders.
	■ No						
	Yes. Fill in the details.						
	Case Title Case Number		Court or agency Name	Natu	ure of the o	case	Status of the case
			Address (Number, Street, City, State and ZIP Code)				
Part	t 11: Give Details About Your Bu	siness or Co	onnections to Any Business				
27.	Within 4 years before you filed fo	r bankruptcy	, did you own a business or have a	ny of t	the followi	ng connections to a	ny business?
	☐ A sole proprietor or self-e	employed in a	a trade, profession, or other activity	y, eithe	er full-time	or part-time	
	☐ A member of a limited lial	oility compan	y (LLC) or limited liability partners	hip (LL	_P)		
	☐ A partner in a partnership	)					
	☐ An officer, director, or ma	naging exec	utive of a corporation				
	☐ An owner of at least 5% o	f the voting o	or equity securities of a corporation	n			
	☐ No. None of the above applie	es. Go to Par	rt 12.				
	Yes. Check all that apply abo	ove and fill in	the details below for each busines	ss.			
	Business Name	C	Describe the nature of the business	:		Identification numb	
	Address (Number, Street, City, State and ZIP Code)	N	lame of accountant or bookkeeper		Do not in	clude Social Securit	y number or ITIN.
			•		Dates bus	siness existed	
	A&A Flooring Corp. 3120 Boyle Ter. Apt GF		looring Business		EIN:	36-4101712	
	River Grove, IL 60171		Katarzyna Rek Biz Inc.		From-To	08/06/96-pres	ent
	Within 2 years before you filed fo institutions, creditors, or other pa		, did you give a financial statement	t to any	yone abou	t your business? Inc	lude all financial
	■ No □ Yes. Fill in the details below.						
	Name		Date Issued				
	Address (Number, Street, City, State and ZIP Code)						
Part	t 12: Sign Below						
are to	rue and correct. I understand that	making a falines up to \$2	ncial Affairs and any attachments, a lse statement, concealing property 50,000, or imprisonment for up to 2	, or ob	taining mo	ney or property by f	
	/ Andrzej Stanislaw Adam	_					
	drzej Stanislaw Adamczyk <b>nature of Debtor 1</b>		Signature of Debtor 2				
Date	<b>e</b> February 1, 2018		Date				
Did y	you attach additional pages to Yo	ur Statement	of Financial Affairs for Individuals	Filing	for Bankri	uptcy (Official Form	107)?
■ N	lo						
Officia	al Form 107	Statemen	t of Financial Affairs for Individuals Filir	ng for B	ankruptcy		page

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Case number (if known) Document

☐ Yes	
Did you pay or agree to pay son	neone who is not an attorney to help you fill out bankruptcy forms?
■ No	
☐ Yes. Name of Person	. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this inform	mation to identify your cas	se:		
Debtor 1	Andrzej Stanisla	w Adamczyk		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
(Spouse II, IIIIIIg)	First Name	widdle Name	Last Name	
United States Ba	ankruptcy Court for the: N	IORTHERN DIST	RICT OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing
Official Fo	rm 108			
		for Indiv	iduals Filing Under Chapt	or 7
Statemen	it of filterition	ioi iiidiv	iduals i lillig Offder Chapt	<b>er /</b> 12/15
If you are an indi	ividual filing under chapte	r 7 vou must fil	out this form if	
	e claims secured by your		out this form in.	
_	• • • • • • • • • • • • • • • • • • • •	• •	at averter d	
	sed personal property and		ot expired. you file your bankruptcy petition or by the date s	et for the meeting of creditors
whiche on the	ever is earlier, unless the c	ourt extends the	e time for cause. You must also send copies to the	e creditors and lessors you list
If too manning a ma		- i-i-t b	sh ara a wallo saan a sibla fan awan bin s a anna t	uformation Both debtors would
	nd date the form.	a joint case, bo	th are equally responsible for supplying correct i	ntormation. Both deptors must
Be as complete a	and accurate as possible.	If more space is	needed, attach a separate sheet to this form. On	the top of any additional pages.
	our name and case number			and top or any anameter pugget,
Part 1: List Yo	our Creditors Who Have S	ocured Claims		
Pail I. List fo	our Creditors willo have 5	ecured Claims		
1. For any credit information be		1 of Schedule D	: Creditors Who Have Claims Secured by Propert	y (Official Form 106D), fill in the
	editor and the property that	is collateral	What do you intend to do with the property that secures a debt?	t Did you claim the property as exempt on Schedule C?
Creditor's			Currender the property	□No
name:			☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
			☐ Retain the property and redeem it.	□Yes
Description of			Reaffirmation Agreement.	
property			☐ Retain the property and [explain]:	
securing debt:	:			_
Creditor's			☐ Surrender the property.	□ No
name:			Retain the property and redeem it.	<b>110</b>
			☐ Retain the property and enter into a	☐ Yes
Description of			Reaffirmation Agreement.	
property			☐ Retain the property and [explain]:	
securing debt:	:			_
Creditor's			☐ Surrender the property.	□ No
name:			☐ Retain the property and redeem it.	
			☐ Retain the property and enter into a	☐ Yes

Official Form 108

Creditor's

Description of

securing debt:

property

Statement of Intention for Individuals Filing Under Chapter 7

☐ Surrender the property.

Reaffirmation Agreement.

☐ Retain the property and [explain]:

☐ No

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Debtor 1 Andrze	ej Stanislaw Adamczyk	Case numb	Der (if known)
name:		☐ Retain the property and redeem it.	□Yes
Description of		☐ Retain the property and enter into a Reaffirmation Agreement.	
property		☐ Retain the property and [explain]:	
securing debt:			
Part 2: List Your	· Unexpired Personal Property Lea	Sac	
for any unexpired <sub> </sub> n the information b	personal property lease that you list below. Do not list real estate leases	sted in Schedule G: Executory Contracts and L. Unexpired leases are leases that are still in Le if the trustee does not assume it. 11 U.S.C.	effect; the lease period has not yet ended.
Describe your une	xpired personal property leases		Will the lease be assumed?
Lessor's name:	Malgorzata Gut		□ No
			■ Yes
Description of lease Property:	d Lease 10-01-2017 thro	ugh 09-30-2018	
Part 3: Sign Belo	ow		
	erjury, I declare that I have indicate ject to an unexpired lease.	d my intention about any property of my esta	ate that secures a debt and any personal
X /s/ Andrze	ej Stanislaw Adamczyk	X	
	anislaw Adamczyk	Signature of Debtor 2	
Date Feb	ruary 1, 2018	Date	

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 18-02955 Doc 1 Filed 02/01/18 Entered 02/01/18 15:19:12 Desc Main Document Page 49 of 52

B2030 (Form 2030) (12/15)

### **United States Bankruptcy Court** Northern District of Illinois

In r	Andrzej Stanislaw Adamczyk		Case N	
		Debtor(s)	Chapte	er <u>7</u>
	DISCLOSURE OF COMPENSAT	TION OF ATTO	RNEY FOR	DEBTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I cocompensation paid to me within one year before the filing of the be rendered on behalf of the debtor(s) in contemplation of or in	e petition in bankruptcy,	or agreed to be p	paid to me, for services rendered or to
	For legal services, I have agreed to accept		\$	1,450.00
	Prior to the filing of this statement I have received		\$	700.00
	Balance Due		\$	750.00
2.	\$ of the filing fee has been paid.			
3.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
4.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5.	■ I have not agreed to share the above-disclosed compensatio	n with any other person	unless they are n	nembers and associates of my law firm
	☐ I have agreed to share the above-disclosed compensation we copy of the agreement, together with a list of the names of t			
6.	In return for the above-disclosed fee, I have agreed to render le	gal service for all aspect	s of the bankrupt	cy case, including:
	<ul> <li>a. Analysis of the debtor's financial situation, and rendering ad</li> <li>b. Preparation and filing of any petition, schedules, statement of</li> <li>c. Representation of the debtor at the meeting of creditors and</li> <li>d. Representation of the debtor in adversary proceedings and of</li> <li>e. [Other provisions as needed]</li> </ul>	of affairs and plan which confirmation hearing, a	n may be required nd any adjourned	,
7.	By agreement with the debtor(s), the above-disclosed fee does r	not include the following	g service:	
	CEF	RTIFICATION		
this	I certify that the foregoing is a complete statement of any agree bankruptcy proceeding.		payment to me f	or representation of the debtor(s) in
_ I	ebruary 1, 2018	/s/ Slava Aaro	on Tenenbaum	l
	Date	Slava Aaron Te		
		Signature of Attorne Slava Aaron Te		artered
		2222 Chestnut	Ave.	
		Ste. 201 Glenview, IL	60026	
		847-724-0300	Fax: 847-430	-5277
		<u>Name of law firm</u>	nbaum.com	
		The of term from		

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### United States Bankruptcy Court Northern District of Illinois

In re	Andrzej Stanislaw Adamczyk		Case No.	Case No.	
		Debtor(s)	Chapter 7		
	VERIFICATION OF CREDITOR MATRIX				
		Number of	Number of Creditors:16		
	The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.				
Date:	February 1, 2018	/s/ Andrzej Stanislaw Adamc: Andrzej Stanislaw Adamc: Signature of Debtor			

Addison Central Pathology 520 E. 22nd St. Lombard, IL 60148

Capital One 15000 Capital One Dr Richmond, VA 23238

Cardiac Surgery Associates, SC p.o.bOX 153 Channahon, IL 60410

City of Chicago 33589 Treasury Center Chicago, IL 60694

Community First Medical Center 5645 W. Addison St. Chicago, IL 60634

Credence Resource Management LLC P.O.Box 2267 Southgate, MI 48195

DEV Medical Associates SC 5600 W. Addison St. Suite 400 Chicago, IL 60634

Discover Fin Svcs Llc Po Box 15316 Wilmington, DE 19850

Malgorzata Gut 1440 Marilyn Ct. Rolling Meadows, IL 60008

Midwest Imaging Professionals 2490 W. 26th Ave. Ste 220A Denver, CO 80211

Northstar Anesthesia of Illinois LL P.O.Box 612485 Dallas, TX 75261

Northwest Pulmonary Assoc. 7447 W. Talcott Ave Suite 542 Chicago, IL 60631

Resurrection Medical Center 7435 West Talcott Ave Chicago, IL 60631

RMC Cardiology 520 E. 22nd St Lombard, IL 60148

Superioe Ambulance Service P.O.Box 1407 Elmhurst, IL 60126

Wells Fargo Dealer Services PO BOX 17900 Denver, CO 80217